

LOBBYING REGISTRATION FORM

To be used for initial registrations and renewals.
Registrations expire on January 31 unless a renewal is
submitted between December 1 and January 31.

#230

Lobbyist's Registration Number

FOR OFFICE USE ONLY

Postmark Date: 3-8-01

P. 11-5067
B. 1000
K.S.

1010744

Instructions

- Print in ink or type.
- Complete form, have it notarized and return with \$10 registration fee to the Board of Ethics, 8401 United Plaza Blvd., Suite 200 Baton Rouge, LA 70809-7017, (504) 922-1400.
- Initial registrations must be submitted within 5 days of (1) employment as a lobbyist or (2) first action requiring registration. Renewals must be submitted between December 1 and January 31.

1. NAME MOUTON, JR., EDGAR G.
Last First MI
2. BUSINESS PHONE (337) 234-9955
Area Code and Phone Number
3. BUSINESS ADDRESS POST OFFICE BOX 2670, LAFAYETTE, LA 70502
Street and No. City State Zip
4. EMPLOYER SELF-EMPLOYED
5. EMPLOYER'S ADDRESS NA
Street and No. City State Zip

6. LIST BELOW (a) Names of persons, groups, or organizations which you represent; (b) the address of each such person, group, or organization you represent; (c) the type of business each is engaged in or the purpose or function of the organization or group; (d) whether or not the client or someone else pays you to lobby.

1. Name Pharmaceutical Research & Manufacturers of America

Address 1100 Fifteenth Street NW, Washington, DC 20005

Business or purpose Pharmaceutical Research & Manufacturers

Does this person pay you? Yes

If No, who pays you? _____

2. Name _____

Address _____

Business or purpose _____

Does this person pay you? _____

If No, who pays you? _____

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MAR 8 2001
OFFICE OF THE
ATTORNEY GENERAL
STATE OF LOUISIANA

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3. Name _____

Address _____

Business or purpose _____

Does this person pay you? _____

If No, who pays you? _____

4. Name _____

Address _____

Business or purpose _____

Does this person pay you? _____

If No, who pays you? _____

5. Name _____

Address _____

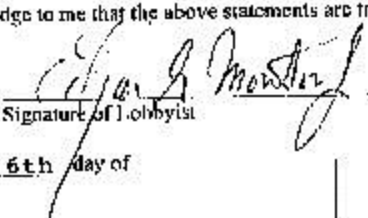
Business or purpose _____

Does this person pay you? _____

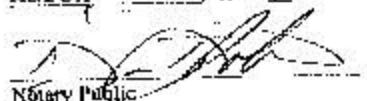
If No, who pays you? _____

State of LOUISIANAParish of LAFAYETTE

Before me, the undersigned authority, personally came and appeared Edgar G. Mouton, Jr., who, after being duly sworn by me, did declare and acknowledge to me that the above statements are true and correct.


Signature of Lobbyist

Sworn to and subscribed before me on this 6th day of
March, 19 2001


Notary Public

Rev. 8/97

